Introduced by Senator Speier

(Principal coauthors: Assembly Members Liu and Lieber)

February 22, 2005

An act to add Chapter 5 (commencing with Section 3430) to Title 2 of Part 3 of the Penal Code, relating to the Dignity Gender Specific Standards for Women in Prison Task Force.

LEGISLATIVE COUNSEL'S DIGEST

SB 617, as amended, Speier. Women prisoners: Dignity Gender Specific Standards for Women in Prison Task Force.

Existing law generally regulates the conditions of incarceration for women inmates in state prisons.

This bill would establish the Dignity Gender Specific Standards for Women in Prison Task Force, and charge it with evaluating certain conditions in all publicly and privately operated correctional institutions for women, and reporting on those conditions to the Secretary of the Youth and Adult Correctional Agency. The bill would require the secretary to compile a report based on the task force member reports, make specified responses therein, and submit it to the Legislature and the Governor no later than January 1, 2007. The bill would require pregnant inmates to be housed separately and to receive specified care. It would make related changes.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

SB 617 -2-

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The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares all of the following:

- (a) The Department of Corrections (CDC) currently incarcerates 10,800 female offenders in four prisons and four privately operated lower level facilities.
- (b) The CDC currently treats only 1,764 of the total female offender population for substance abuse issues.
- (c) At least 85 percent of these women are substance abusers, victims of crime, or mentally ill. More than 80 percent are mothers to minor and dependent children. The CDC has not increased the number of mother-child beds since the early 1980's, even though the female inmate population has increased.
- (d) Most female offenders in prison report experiencing trauma or abuse prior to committing a crime. Sixty-five percent have a family member in jail or prison. Sixty-two percent had been separated from their children against their will. Twenty-one percent had been a child of the foster care system. Forty-nine percent have been a victim of physical assault as an adult, and 31 percent were assaulted as a child. Twenty-nine percent have been raped as a child and 31 percent were raped as an adult. Forty-eight percent lived in a violent home as a child. Fifty-eight percent were abused or neglected as a child.
- (e) Seven thousand two hundred eighty-four female offenders are currently serving sentences for nonviolent or nonserious crimes. Only 833 female offenders are serving sentences for serious crimes and 2,531 for violent crimes.
- (f) More than 67 percent of all female offenders incarcerated in the Department of Corrections prisons are serving sentences for nonviolent and nonserious crimes.
- (g) In 2004, of the 10,181 female offenders serving sentences only 7,006 were new commitments, 1,785 violated parole with a new crime, 1,040 were returned to custody for minor parole violations, and 350 had parole revocation cases pending.
- (h) The CDC currently houses 15 females on death row at the Central California Women's Facility in Chowchilla although no female offender has been executed since the death penalty was reinstated in the 1980's.

-3- SB 617

(i) In 2004, of the 10,181 female offenders in prison, 3,069 committed crimes against another person, 3,507 committed property crimes, 3,076 committed drug crimes, and 529 committed miscellaneous crimes.

- (j) Currently, the racial profile of female offenders in prison is 39 percent Caucasian, 25 percent Hispanic, 29 percent black or African American and less than 1 percent other ethnic groups.
- (k) The average female offender in prison is 36 years of age. Eleven percent are under 25 years of age, and less than 1 percent are over 50 years of age.
- (l) Only 1.3 percent of female offenders in prison are sex offenders as opposed to 14.3 percent of male offenders in prison.
- (m) Only .07 percent of female offenders are committed to prison for a third strike as opposed to the 5 percent of the male offender population who are third strike cases.
- (n) Eight and one-half percent of the female offender population is serving life sentences with possibility of parole and 1.3 percent are serving life sentences without the possibility of parole.
- (o) Since 2001, more than 1,100 female offenders have given birth in prison. The estimated cost associated with these births is approximately \$4.2 million. Female offenders giving birth while in prison are separated from their newborn after two days in the hospital for regular delivery and four days after cesarean section.
- (p) Female prisons do not have waiting lists for family and overnight visiting. Historically, female offenders do not have strong family support and lose most of their family contact while in prison.
- (q) Female offenders' health care costs are approximately 60 percent higher compared to male offenders' health care. The CDC attributes this disparity to higher rates of HIV infections, mental disorders, victimization, and female reproduction organs.
- 34 (r) Female offenders receive very little dental care resulting in 35 12,125 tooth extractions and merely 39 root canals from 2002 to 36 2004, inclusive.
- 37 SECTION 1.

38 SEC. 2. Chapter 5 (commencing with Section 3430) is added 39 to Title 2 of Part 3 of the Penal Code, to read:

SB 617 —4—

Chapter 5. Dignity Gender Specific Standards for Women in Prison Task Force

3430. There is hereby established a Dignity Standards for Women in Prison Task Force for the purpose of assessing the degree to which female inmates are subjected to a sexually abusive environment, and unhealthy hygienic practices in correctional institutions for women under the jurisdiction of the Youth and Adult Correctional Agency. Gender Specific Standards for Women in Prison Task Force for the purpose of evaluating the current conditions in all publicly and privately operated correctional facilities for women within the Youth and Adult Correctional Agency. The task force shall be charged with evaluating the current conditions for women in prison and making recommendations for changes to meet their specific needs.

- 3431. (a) The task force shall consist of six members appointed as follows:
- (1) The Governor shall have two appointments, one of which shall be a physician knowledgeable in women's health an advocate for women in prison and the other shall be a female ex-offender who spent a minimum of one year incarcerated in a women's prison in California.
- (2) The Senate Pro Tempore shall have two appointments, one of which shall be a physician knowledgeable in female Senator and the other a clinician with a vast knowledge about women's health.
- (3) The Speaker of the Assembly shall have two appointments, one of which shall be a physician knowledgeable in female Assembly Member and the other a clinician with a vast knowledge about women's health.
- (b) No task force member shall be an employee of an agency within the Youth and Adult Correctional Agency.
- (c) The Secretary of the Youth and Adult Correctional Agency or his or her designee shall be responsible for establishing a process for the task force members to observe and interview women inmates in a manner that is not disruptive to the operation of a correctional institution, nor a process that shall subject the members to undue personal risk. Any and all licensed physicians who are members of the task force shall be allowed, with inmate

-5— SB 617

consent, to conduct medical examinations and to review medical records which shall be made immediately available to the licensed physician task force members by the institution.

- 3432. At a minimum the task force shall—address the following conditions as they may or may not exist at each state correctional institution for women:
- (a) The housing of frail and elderly women in cells with younger women who exhibit aggressive sexual behavior, irrespective of the level of elassification of each woman in a cell.
- (b) Policies and practices for women to obtain sanitary supplies, including the presentation of soiled supplies as a requirement to obtain replacement supplies.
- (c) Bathroom facilities and bathroom policies that do not provide women sufficient privacy from observation by male eustody personnel.
- (d) Identify why some women are unable to obtain "indigent bags" that contain adequate supplies of soap, toothpaste, deodorant, and basic cosmetic supplies.
- (e) Identify bunk beds in which the clearance between the upper and lower bunks does not allow an inmate to sit up in the lower bunk without striking the upper bunk with her head.
- (f) Identify the extent to which hygiene protocol affects the health of each inmate observed.
- (g) Review preventative medicine protocol at each institution. 3433. (a) The task force shall be fully established no later than April 1, 2006, and it shall be the objective of the task force, with the approval of the Youth and Adult Correctional Agency, that each correctional institution for women be observed by the task force no later than July 1, 2006. The secretary shall have the authority to extend the observation time for up to 90 days for good cause. A minimum of four members of the task force shall participate in each observation visit.
- (b) For purposes of this section only, a "personal observation visit" shall mean that the task force members during an eight-hour period shall have access to any and all inmates, including those confined to a special housing unit, provided that the warden determines that the safety of the task force members may be reasonably assured.
- (c) If during the course of observations, a licensed medical professional task force member identifies a medical condition

SB 617 -6-

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that may warrant attention, that member is authorized to notify
 the chief medical officer of the institution of the health issue of
 concern.

3434. The task force members may confer with each other regarding their personal observations, however, each member shall issue a report to the secretary within 30 days after the final observation of a correctional institution. The secretary shall compile the task force comments into one final report that shall not personally identify inmates and that shall be reported to the Legislature and the Governor no later than January 1, 2007. The secretary shall respond to each finding in the report and shall include the response in the final report. evaluate the need for gender specific programs to meet the needs of the majority of the women, and shall address the following conditions, including, but not limited to:

- (a) Mothers of dependent and minor children.
- 17 *(b) Currently pregnant inmates.*
- 18 *(c)* Women who have been victims of crime themselves.
- 19 *(d)* The need for mental health services.
- 20 (e) The need for drug or alcohol abuse treatment.
- 21 (f) Women who will serve less than a two-year sentence.
- 22 (g) Women who do not have a high school diploma or GED.
 - (h) Women who committed their crimes to enable a domestic abuser.
 - (i) Women who possess few or no employment skills.
 - (j) Women who do not receive regular visiting or strong family support while in prison.
 - (k) Women who have self-esteem and self-worth issues.
- 29 (1) Poor medical and dental care.
 - (m) Poor nutritional habits and lifestyles.
- 31 (n) Women who have developmental disabilities.
- 32 (o) Daily physical exercise.
- 33 3433. (a) The Youth and Adult Correctional Agency (YACA) 34 shall ensure the task force has unlimited access to all female 35 institutions, and female offenders shall be afforded the 36 opportunity to have private discussions with task force members 37 without fear of retaliation. Any YACA staff member found to 38 interfere with the charge of this task force shall be subject to the
- 39 appropriate disciplinary process currently in place.

__7__ SB 617

1 (b) All female inmates incarcerated in YACA institutions who
2 are pregnant shall be housed separately with other pregnant
3 inmates and shall be given the proper nutritional and balanced
4 meals. The department shall provide prenatal care at the level
5 recommended by the American Obstetrics/Gynecological
6 Standards and shall be afforded a program designed specifically
7 for mothers with infants for the first six months of the child's life.
8 Once the child has reached six months of age the department
9 shall make the necessary arrangements for the inmate to have
10 regular weekly contact with the infant.